(c) whether the above order may be looked into and fresh orders issued rectifying the anomalies?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) Benefits available to Government servants under various schemes are different. Revision of rates for subscription were made after consulting the Department of Expenditure.

(b) Entitlements of Wards in AIIMS is based on the pay drawn in the pay band, and all officials drawing same pay are entitled to identical facilities in AIIMS.

(c) The Ministry of Health & Family Welfare does not intend to revise the instructions issued on 20th May, 2009.

Role of patient welfare Committees under NRHM

†798.SHRI ALI ANWAR ANSARI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the role of patient welfare Committees in the National Rural Health Mission;

(b) whether these Committees are effective in helping the poor and the needy;

(c) steps being taken by Government to ensure regular meetings of these Committees, and make their welfare role more effective; and

(d) the details of Government's plan to include eminent persons from society besides officials in these Committees, and give them more and more administrative and financial powers?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (d) The Patient Welfare Committees [Rogi Kalyan Smitis (RKS)] are envisaged to be a registered society, for managing the affairs of health facility concerned. It comprises members from local Panchayati Raj Institutions (PRIs). Non Government Organisations(NGOs), local elected representatives, eminent persons from the community and officials from Government who are responsible for proper functioning and management of the health facility. The RKS is supported with annual corpus grant under NRHM and is also envisaged to receive the user charges, if any levied at the facility concerned. The RKS are empowered to manage the health facility and compensate for any service gaps. The RKS are being highly effective in the States and are helping the poor and needy. The Government has disseminated the guidelines for ensuring regular meetings of these committees so as to make them more effective. The functioning of RKSs is monitored as an integral part of Review Missions under the NRHM.

Status of Indian public health standards

†799.SHRI LALIT KISHORE CHATURVEDI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether structural, personnel, equipment and management standards have been defined in Indian public health standards;

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†Original notice of the question was received in Hindi

(b) whether standards have been evolved for sub centres, Primary health centres and district hospitals;

(c) if so, the details thereof;

(d) whether facility survey has been undertaken for upgradation; and

(e) if so, the details thereof in respect of Rajasthan?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) Yes.

(c) The details of Indian Public Health Standards (IPHS), are available on this Ministry's web site *i.e* www.mohfw.nic.in

(d) Yes. As on 1st July, 2009, Facility Survey reports have been received for 6362 District Hospital/Sub Divisional Hospital, Community Health Centres (CHCs), Primary Health Centres (PHCs) and Sub Centres (SCs) from 18 States /UTs.

(e) As per the information received from the Government of Rajasthan, Facility Survey has baen conducted for all the SCs, PHCs, and CHCs.

The Facility Survey has identified hospital-wise demands for manpower, equipment, infrastructure and bed capacity, which have been duly included in, for formation of State Programme Implementation Plans under National Rural Health Mission.

Primary health care to all

800. SHRIMATI T. RATNA BAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is achieving the national objective of delivering primary healthcare to all;

(b) if so, the details thereof, State-wise particularly in Andhra Pradesh; and

(c) if not, by when such objective will be achieved?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (c) Under the National Rural Health Mission (NRHM) comprehensive steps have been undertaken for improving the Primary Health Care System in the country. The NRHM envisages providing quality health care on equitable and affordable basis to all the citizens. The thrust of NRHM is on establishing a fully functional, community owned, decentralized health delivery system. NRHM facilitates simultaneous action on collateral determinants of health like water, sanitation, education, nutrition, etc. Under NRHM major steps have being taken to augment the Health Human Resources, improve infrastructure and equipments at health facilities and improve planning, management and logistics/supply chain management at health facilities.

Under the NRHM, in the State of Andhra Pradesh, 70,700 Community Link workers (ASHAs) have been positioned, 21916 Village Health & Sanitation Committees have been constituted, 10322 Sub Centers strengthened, 800 PHCs operationalised on 24x 7 basis. The State has reported